BEST AVAILABLE COPY

| | | | | | | | | Application or Docket Number | | | | | | |
|---|---|---|---------------------------------------|-------------------------------|--------------|------------------|--------|------------------------------|------------|------------------------|----------|---------------------|------------------------|--|
| PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2000 | | | | | | | | • | 09/9/2,518 | | | | | |
| | | | | | | | | | | 1770 | _4 | 7001 | <u> </u> | |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALI TYPE | L EI | VTITY | OR | OTHER SMALL | | |
| TOTAL CLAIMS | | | (5 | | | | | RAT | E | FEE | | RATE | FEE | |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | | BASIC | FEE | 355.00 | OR | BASIC FEE | 710.00 | |
| TOTAL CHARGEABLE CLAIMS | | | 5 minus 20= | | • | | | X\$ 9= | | • | OR | X\$18= | | |
| INDEPENDENT CLAIMS | | | g minus 3 = | | • | | | X40= | | | OR | X80= | | |
| MU | LTIPLE DEPEN | DENT CLAIM PR | REŠENT | | | | +135= | | | OR | +270= | | | |
| • If | the difference | in column 1 is | less than zero, enter "0" in column 2 | | | | TOTA | \L | | OR | TOTAL | 710 | | |
| Claims as amended - Part II | | | | | | | | | | · | , | OTHER | MAHT | |
| | | | | | | (Column 3) | 1 - | SMAI | LLI | ENTITY | OR | SMALL | ENTITY | |
| AMENDMENT A | 68/05 | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER OUSLY | PRESENT EXTRA | | RATI | E | ADDI- TIONAL FEE | | PATE | ADDI- TIONAL FEE | |
| SQ. | Total | · /5 | Minus | •• / | 15 | = 0 | | X\$ 9 | = | | OR | X\$18≂ | | |
| AME | Independent | • 3 | Minus | *** | 3 | | | X40: | - | | OR | X80= | | |
| | FIRST PRESE | NTATION OF MU | JETIPLE DEP | ENDEN | CLAIM | | | +135 | = | | OR | +270= | | |
| | • | | | | | | E | TO | | | OR | TOTAL ADDIT. FEE | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | ADDIT. F | ושש | | , | AUUII. FEE | <u></u> | |
| 8 | | CLAIMS REMAINING | | HIGH | EST | | 1 | | | ADDI- | (| | ADDI- | |
| AMENDMENT | | AFTER AMENDMENT | | PREVIO PAID | DUSLY | PRESENT EXTRA | | RATI | E | TIONAL FEE | | RATE | TIONAL FEE | |
| | Total | • | Minus | •• | | = | | X\$ 9 | = | | OR | X\$18= | | |
| | Independent | • . | Minus | *** | | = | | X40= | _ | | OR | X80= | | |
| | FIRST PRESE | ST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | \dashv | | | | | |
| | | | | | | | | +135 | | | OR | +270= | | |
| · | | | | | | | | TO ADDIT. F | | | OR | TOTAL ADDIT. FEE | | |
| | (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | | RATE | | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | • | Minus | •• | | = | | X\$ 9: | _ | | OR | X\$18= | | |
| E C | Independent | • | Minus | ••• | | = | | X40= | { | | | X80= | | |
| 4 | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | A4U | | | OR | ∧8U= | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | | | | OR | +270= | | |
| ** | "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | | |
| | ine "mighest Num | ider Previously Pai | o For (Total or | Independ | ent) is the | nighest numbe | er lou | ind in the | app | propriate box | t in col | lumn 1. | | |